

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m c</i>		11/2/00
O.I.P.E. CLASSIFIER		43	1/1/00
FORMALITY REVIEW		71423	12-22-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	0
19	0
20	✓
21	0
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23	✓
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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